PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/517,381			ing Date 22/2005	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
⊢	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE		N/A		N/A		N/A	TEE (a)	l	N/A	TLL (U)
┢	(37 CFR 1.16(a), (b), o	or (c))	hua H		21/4		-		ł	H	
片	(37 CFR 1.16(k), (f), c		N/A		N/A		N/A		l	N/A	
TO	(37 CFR 1.16(o), (p), o		N/A		N/A		N/A			N/A	
(37	CFR 1.16(i)) EPENDENT CLAIM	<u> </u>	minus 20 = *			IJ	x \$ =		OR	x \$ =	
	CFR 1.16(h))		m		IJ	x \$ =		l	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addi	ets of pape 250 (\$125 tional 50 s	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).							
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))		IJ			]		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL	
	APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							OTHER THAN SMALL ENTITY OR SMALL ENTITY			
AMENDMENT	04/28/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ME	Total (37 CFR 1.18(i))	• 6	Minus	20	= 0	П	x \$ =		OR	X \$52=	0
뷡	Independent (37 CFR 1.16(h))	• 4	Minus	4	= 0	l	x \$ = 1		OR	X \$220=	0
Ž	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
ᆫ		(Column 1)		(Column 2)	(Column 3)	_					
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ᆲ	Total (37 CFR 1,16(i))		Minus		=	H	x \$ =		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(h))		Minus	***		1	x \$ =		OR	x \$ =	
Z I	Application Size Fee (37 CFR 1.16(s))								1		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					H			OR		
						•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
If the entry in column 1 is less than the ontry in column 2, write 0" in column 3.  If the "Highest Number Previously Paid For IN THIS SPACE is less than 30, enter "20".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If the "Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3".  If th											

This collection of information is required by 37 CFR. 1.16. The information is required to obtain or retain a benefit by the public with in is to life (and by the USFTO to process) an application. Confidentiality is overwined by 80 LSC. 122 and 37 CFR. 1.14. This collection is estimated to take 12 minutes to complete, including pathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer. U.S. Patent and Trademark Office, U.S. Department of Commorce, P.O. Box 1450, Alexandris, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandris, VA 22313-1450.